(c) to (e) Though the existing provision of law are sufficient to check the alleged malpractices relating to fake drugs, Government is continuously vigilant and has taken following steps to further strengthen the deterrent measures and infrastructures in that regard:

(i) The Drugs and Cosmetics (Amendment) Bill, 2005 in pending in the Parliament to *Inter-alia* enhance the penalties provided, making offences cognizable and non bailable and authorizing any gazetted officer to file prosecution for drug related offences.

(ii) Under the Capacity Building Project through World Bank, assistance has been provided to upgrade testing facilities and to establish new drug testing laboratories so as to enhance the capacity of the laboratories to test large number of samples. Under this project 23 States and 6 Central Drugs Laboratories have been strengthened.

(iii) Schedule M to the Drugs and Cosmetics Rules, 1945, pertaining to Good Manufacturing Practices has been amended to Make it at par with the international standards and it is mandatory for the manufacturers of drugs to comply with the requirements of this Schedule for quality control of the drugs manufactured by them.

(iv) Detailed guidelines have been issued to the State Government to undertake focused surveillance over possible movement of spurious drugs.

(v) Specific training program for regulatory officials of State Governments on logistics of intelligence work, prosecutions, etc., has been conducted with the assistance of FDA, Maharashtra.

(vi) Pharma industry and trade has been motivated to fight menace of spurious drugs as a shared responsibility. Number of cases could be successfully detected through the initiative taken by Pharma industry involving hiring of retired intelligence officers.

Estimated number of HIV patients

†69. SHRI LALIT KISHORE CHATURVEDI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that there is no uniformity in the estimates of the various organisations with regard to the number of people infected with HIV;

(b) if so, the basis of these estimates thereof;

(c) what is the authenticity of these estimates;

(d) whether it was ensured while ascertaining the number of people infected with HIV that they are not counted twice or thrice or left uncounted;

(e) whether Government is considering to develop any system for carrying out an authentic survey in this regard if so, the agency to be entrusted with this job and by when the same will be completed; and

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†Original notice of the question was received in Hindi.

(f) whether foreign companies and organisations play any role in the publicity with regard to deadly disease of AIDS?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) No Sir. The method of estimation of HIV used in India is according to the WHO/UNAIDS HIV Estimation model. The recent revision of HIV estimates has been done in consultation with WHO/UNAIDS and other international organizations/experts. All these organizations have arrived at a consensus on HIV estimates in India. This method ensures uniformity and international comparability.

(c) The revised estimates of HIV infections are more accurate as they are based on an expanded surveillance system. The use of multiple data sources including National Family Health Survey-3, has helped in refining and improving the assumptions used for HIV estimation.

(d) Yes Sir. The methodology of HIV estimation includes data obtained from HIV Sentinel Surveillance and National Family Health Survey. The information obtained from these two sources follows a scientific sampling technique which avoids duplication.

(e) National AIDS Control Organisation conducts annual HIV Sentinel Surveillance across the country in different population groups. NACO has revised the operational guidelines for conducting HIV Sentinel Surveillance following an international consultation in April 2008 with the support of WHO. The next round of HIV Sentinel Surveillance is going to be conducted from 1st November 2008 to 28th February 2009. HIV Sentinel Surveillance is being implemented with the support of two national institutes (National Institute of Health and Family Welfare, New Delhi and National Institute of Medical Statistics, ICMR, New Delhi), seven Regional Public Health Institutes (All India Institute of Medical Sciences, New Delhi, Post-Graduate Institute of Medical Education and Research, Chandigarh, National AIDS Research Institute, Pune, National Institute of Epidemiology, Chennai, All India Institute of Hygiene and Public Health, Kolkata, National Institute of Cholera and Enteric Diseases, Kolkata and Regional Institute of Medical Sciences, Imphal) and State AIDS Control Societies of all the states and UTs.

(f) Foreign organizations through their Indian affiliates contribute in the implementation of IEC programmes for prevention, control and treatment of HIV/AIDS.

Child and maternal mortality rates

†70. SHRI LALIT KISHORE CHATURVEDI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the mortality rate among children below the age of 5 years and the maternal mortality rate in the year 2006-07, *vis-a-vis* in the year 1990 and the details thereof, State-wise;

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†Original notice of the question was received in Hindi.